



388235

**DISPOSAL STANDARDS FOR NEW YORK STATE  
REGULATED HAZARDOUS PCB WASTES**

GENERATOR NAME: USEPA Region 5 / Jefferson ProcessingMANIFEST# NYB9326682 CWM PROFILE # CS3622BULK LOAD DATE OF REMOVAL FROM SERVICE 8/26/00

The following NY State regulated wastes are land restricted in the State of New York and are subject to 6 NYCRR Part 376. Refer to 6 NYCRR 376.4(f) for New York land disposal requirements. Check all that apply:

B001    B002    B003    B004    B005    B006    B007

Certification - Waste Meets Treatment Standards

I am the generator of the waste as identified above, that is restricted under 6 NYCRR Part 376. I have determined that this waste meets all applicable treatment standards set forth in 6 NYCRR Part 376 and, therefore, it can be land disposed without further treatment.

I certify under penalty of law that I personally have examined and am familiar with the waste, through analysis and testing or through knowledge of the waste, to support this certification that the waste complies with the treatment standards specified in Part 376, Section 376.4 and all applicable prohibitions set forth in subdivision 376.3(b) of Part 376 or RCRA Section 3004(d). I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine or imprisonment.

Notification - Waste Does Not Meet Treatment Standards

I am the generator of a waste restricted under 6 NYCRR Part 376 as identified above. I notify that I personally have examined and am familiar with the waste, through analysis and testing or through knowledge of the waste, to support this notification that the waste does not comply with the treatment standards specified in 6 NYCRR Part 376.4(f). This waste must be treated to the applicable standard set forth in 6 NYCRR Part 376.4(f) prior to land disposal.

GENERATORS SIGNATURE: *JH Coif*TITLE: On-Scene CoordinatorDATE: 8/26/00

REVISED 08/08/97

NYB9326682

STATE OF NEW YORK  
DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF SOLID & HAZARDOUS MATERIALS



**HAZARDOUS WASTE MANIFEST**  
P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

Please type or print. Do not staple.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA No. 0 H R 0 0 0 0 1 0 0 0 8 1	Manifest Doc. No. 0 0 0 1 3	2. Page 1 of 1	Information within heavy bold line is not required by Federal Law.
3. Generator's Name and Mailing Address US EPA REGION V 77 WEST JACKSON BLVD (HSE-5J) ATTN: THOMAS COOK CHICAGO IL 60604 312 886-7182				A. <b>NYB9326682</b>	
4. Generator's Telephone Number		5. Transporter 1 (Company Name) <b>Tonawanda Tank</b>		B. Generator's COUNTY RD 74 MINGO JNCTN OH 43938	
6. US EPA ID Number NY D 0 9 7 6 4 4 8 0 1		7. Transporter 2 (Company Name)		C. State Transporter's ID	
8. US EPA ID Number		9. Designated Facility Name and Site Address CWM CHEMICAL SERVICES, L.L.C. 1550 BALMER RD. MODEL CITY NY 14107		D. Transporter's Telephone (716 873702)	
10. US EPA ID Number N Y D 0 4 9 8 3 6 6 7 9		11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. <b>9, UN2315, III</b>		E. State Transporter's ID <b>82819N, NY</b>	
12. Containers Number   Type 001   CM		13. Total Quantity EST 00455		F. Transporter's Telephone ( )	
14. Unit Wt/Vol K		15. Special Handling Instructions and Additional Information CHEMTREC Emergency Response Number (800)424-9300 WMI Contract SR # <u>571984</u> PCB OUT OF SERVICE DATE <u>8/26/00</u>		G. State Facility ID	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.		17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Stepan Krupnicki</b>		H. Facility Telephone (716 754-8231)	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature <i>Stepan Krupnicki</i>		Mo. Day Year 10.25.00	
19. Discrepancy Indication Space		Signature <i>Thomas Cook</i>		Mo. Day Year 10.25.00	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature		Mo. Day Year	

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

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4. Generator's Telephone Number		6. US EPA ID Number NYD097644801		B. Generator's ID COLUMBIA COUNTY RD 74 RINGO JUNCTN OH 43938		
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7. Transporter 2 (Company Name)		10. US EPA ID Number		D. Transporter's Telephone (716) 273702		
9. Designated Facility Name and Site Address CWM CHEMICAL SERVICES, L.L.C. 1550 BALMER RD. MODEL CITY NY 14107		10. US EPA ID Number NYD049836679		E. State Transporter's ID 82819N,NY		
				F. Transporter's Telephone ( )		
				G. State Facility ID		
				H. Facility Telephone ( ) 716 754-8231		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers Number	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. aro, POLYCHLORINATED BIPHENYLS, SOLID MIXTURE 9, UN2315, 111		001	CM	EST 00455	K	EPA STATE
b.						EPA STATE
c.						EPA STATE
d.						EPA STATE
J. Additional Descriptions for Materials listed Above CS3622				K. Handling Codes for Wastes Listed Above		
a.		c.		a. <input type="checkbox"/> c. <input type="checkbox"/>		
b.		d.		b. <input type="checkbox"/> d. <input type="checkbox"/>		
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Printed/Typed Name Thomas Cook		Signature <i>Thomas Cook</i>		Mo. Day Year 10 25 00		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Stepan Krupnicki		Signature <i>Stepan Krupnicki</i>		Mo. Day Year 10 25 00		
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# INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

## General Information

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## Distribution

Distribution of each copy of the manifest is indicated on the bottom of the form. Copies of the manifest must be mailed promptly. New York State regulations provide five (5) working days for generator and two (2) for a TSD. The Disposer's state is the state in which the designated TSD facility is located. Generator's state is the state in which the installation generating the hazardous waste is located. TSD facility is a treatment, storage or disposal facility.

## Generator Section

**Item 1**-Enter the US EPA ID number (twelve digit number issued by the federal government). The generator must assign a sequential unique, five digit number different for each manifest, as the manifest number.

**Item 2**-If a continuation sheet is used, please enter the total number of sheets here. Any EPA approved continuation sheet may be used, but distribution and completion must meet New York manifest requirements. The document number in Item A must be placed in Item L of each continuation sheet.

**Item 3 and 4**-Self explanatory. These must correspond to the generators US EPA ID number.

**Items 5, 6, 7 and 8**-These are self explanatory. These numbers must be secured from the transporter. If more than one transporter is used, the generator must supply additional copies of this manifest (copy #5) for each transporter.

**Items 9 and 10**-The designated TSD facility, name, address and ID number should appear here.

**NOTE:** All US EPA ID numbers are a twelve digit code starting off with the letters corresponding to the state in which the facility or transporter is located.

**NOTE:** Only New York State authorized transporters and TSD facilities are allowed to transport or receive hazardous waste in New York State. The generator shall check for authorization.

**Item 11**-USDOT requires the word "waste" before or in the shipping name for all hazardous waste. See 49 CFR 171 thru 177. Contact USDOT office for description assistance. Any waste in this box is a considered hazardous waste.

## Item 12-

Number—indicate number of containers (use whole numbers).

Containers/Type	
DM-Metal drums, barrels, kegs	DT-Dump trucks
DW-Wooden drums, barrels, kegs	CY-Cylinders
DF-Fiberboard or plastic drums, kegs	CM-Metal boxes, cartons, cases, roll-offs
TP-Tanks portable	CW-Wooden boxes, cartons, cases
TT-Cargo, tank (tank trucks)	CF-Fiber or plastic boxes, cartons, cases
TC-Tank cars	BA-Burlap, cloth, paper or plastic bags

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden to: Chief Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street S.W., Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

**Item 13**-Actual number of units indicated in box 14. (Do not use fractions or decimals).

## Item 14-Units (wt/vol)

G-Gallons (liquids only)	L-Liters (liquids only)
P-Pounds	K-Kilograms
T-Tons (2,000 pounds)	M-Metric Tons (1,000 kilograms)
Y-Cubic Yards	N-Cubic Meters

**Item 15**-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

**Item 16**-The authorized agent of the generator must read and then sign (by hand) and date this certification. The date is the date of receipt by transporter.

## NEW YORK STATE REQUIRES THIS ADDITIONAL INFORMATION

**Item A**-Number preprinted by New York State Department of Environmental Conservation (NYSDEC).

**Item B**-Generator site address if different from mailing address. If same, write in same.

**Item C and E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

**Item D and F**-Telephone number of authorized agent.

**Item G**-No entry required by NYSDEC

**Item H**-Telephone number at site of TSD facility.

**Item I**-Hazardous waste numbers (letter and three digits) as assigned by Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

**Item J**-If description in item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

**Item K**-Each material must be assigned an ultimate disposal method code as follows: L = Landfill, B = Incineration, heat recovery, burning, T = Chemical, physical, or biological treatment, R = Material recovery of more than 75 percent of the total material. Both the generator and the TSDF should agree on codes assigned in this item.

## Transporter Section

**Items 17 and 18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

## TSDF Section

**Item 19**-The authorized representative of the TSDF must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

**Item 20**-The signature (by hand) of the authorized TSDF agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSDF not providing ultimate disposal agrees to transfer waste to a TSDF authorized to provide ultimate disposal as indicated in Item K.

## Additional Information

1. If the Disposer State supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSDF mail copies to the generator's State and the disposer's State, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding items A thru K, therefore, the generator should contact the disposer's State for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Manifest Section at 518/457-6858 weekdays from 9:00 a.m. to 4:00 p.m.



# INSTRUCTIONS FOR THE NEW YORK STATE UNIFORM HAZARDOUS WASTE MANIFEST

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**Item 14**-Units (wt/vol)

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**Item 15**-Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For international shipments, enter point of departure. Emergency response telephone numbers, or similar information may be included here.

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9. Designated Facility Name and Site Address CMB CHEMICAL SERVICES, L.L.C. 1500 BALMER RD. ROSEL CITY NY 14102		10. US EPA ID Number		E. State Transporter's ID <b>822194NY</b>		
				F. Transporter's Telephone ( )		
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11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total	14. Unit	I. Waste No.	
a. POLYCHLORINATED BIPHENYLS, SOLID RESIDUE		Number	Quantity	Wt/Vol	EPA	
b.		Type			STATE	
c.					EPA	
d.					STATE	
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above		
a.				a	c	
b.				b	d	
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**Item C and E**-State of registration and motor vehicle license plate number of waste carrying portion of vehicle used to transport.

**Item D and F**-Telephone number of authorized agent.

**Item G**-No entry required by NYSDEC

**Item H**-Telephone number at site of TSD facility.

**Item I**-Hazardous waste numbers (letter and three digits) as assigned by Part 371 or 40 CFR 261 must be used to identify hazardous waste. Enter in top box by EPA. If waste is not hazardous in New York but regulated by another state, enter that state's waste code in bottom box.

**Item J**-If description in item 11 (a,b,c,d) contains NOS or other general term, the hazardous waste constituent must be provided here for each. The specific gravity assumed to be one (1.00) unless indicated in lower right of each box.

**Item K**-Each material must be assigned an ultimate disposal method code as follows: L = Landfill, B = Incineration, heat recovery, burning, T = Chemical, physical, or biological treatment, R = Material recovery of more than 75 percent of the total material. Both the generator and the TSD facility should agree on codes assigned in this item.

## Transporter Section

**Items 17 and 18**-Print or type the full name of person accepting responsibility and acknowledging receipt of material as listed on manifest for transport. Enter date of receipt and signature.

## TSD Facility Section

**Item 19**-The authorized representative of the TSD facility must note in the space any discrepancy between waste described on manifest and waste actually received. Any rejected materials should be listed and destination of those materials provided.

**Item 20**-The signature (by hand) of the authorized TSD facility agent indicates acceptance (except for Item 19) and agreement with statements on this manifest. The date is the date of signature and receipt of shipment. A TSD facility not providing ultimate disposal agrees to transfer waste to a TSD facility authorized to provide ultimate disposal as indicated in Item K.

## Additional Information

1. If the Disposer State supplies a manifest, that state's form must be used. In any case, New York requires that both the generator and TSD facility mail copies to the generator's State and the disposer's State, with the ultimate disposal method indicated in Item K.
2. There may be variations in the requirements between various states regarding items A thru K, therefore, the generator should contact the disposer's State for specific details.
3. If assistance is needed in completion of this manifest, please contact NYSDEC Manifest Section at 518/457-6858 weekdays from 9:00 a.m. to 4:00 p.m.